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CONFIRMATION NO. 1306

SERIAL NUMBER 10/082,819	FILING DATE 02/25/2002  RULE	CLASS 128	GROUP ART UNIT 3764	ATTORNEY DOCKET NO. 13962-002001 / 137745.6 J
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## APPLICANTS

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\*\* CONTINUING DATA

None MB

\*\* FOREIGN APPLICATIONS

None MB

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 03/28/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <u>MB</u> Initials	STATE OR COUNTRY ISRAEL	SHEETS DRAWING 7	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 1
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## TITLE

System for transvaginal drug delivery

FILING FEE

 RECEIVED  
 435

 FEES: Authority has been given in Paper  
 No. \_\_\_\_\_ to charge/credit DEPOSIT ACCOUNT  
 No. \_\_\_\_\_ for following:
☐ All Fees☐ 1.16 Fees ( Filing )☐ 1.17 Fees ( Processing Ext. of time )☐ 1.18 Fees ( Issue )